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PTO/SB-21 (08-00)

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/887,049	
	Filing Date	June 21, 2001	
	First Named Inventor	Kie Y. Ahn	
	Group Art Unit	2823	
	Examiner Name	J.J. Maldonado	
Total Number of Pages in This Submission	29	Attorney Docket Number	MI22-1738

ENCLOSURES <small>(check all that apply)</small>		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers <small>(for an Application)</small>	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing <small>(Red-line & Corrected)</small>	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <small>(Appeal Notice, Brief, Request)</small>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosures <small>(please identify below)</small>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Postcard
<input checked="" type="checkbox"/> Supplemental	<input type="checkbox"/> Request for Refund	PTO Form 1449
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	Cited references
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	The Commissioner is hereby authorized to charge any additional fees required under 37 CFR Sections 1.16 and 1.17 and credit any overpayments to: 23-0925.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Frederick M. Fliegel, Ph.D. Wells St. John P.S.	Reg. No. 36,138
Signature		
Date	Sept. 13, 2002	

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
216.00

Complete if Known

Application Number 09/887,049
Filing Date June 21, 2001
First Named Inventor Kie Y. Ahn
Examiner Name JJ Maldonado
Group Art Unit 2823
Attorney Docket No. ML22-1738

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit card	3. ADDITIONAL FEES	
<input checked="" type="checkbox"/> Deposit account:	<input type="checkbox"/> Money Order	Large Entity/Small Entity	
23-0925		Fee Code (\$)	
Wells, St. John et al.		Fee Description	
The Commissioner is authorized to: (check all that apply)		Fee Paid	
<input checked="" type="checkbox"/> Charge fee(s) indicated below			
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FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity/Small Entity			
Fee Fee Fee Fee			
Code (\$)			
101 740 201 370 Utility filing fee			
106 330 206 165 Design filing fee			
107 510 207 255 Plant filing fee			
108 740 208 370 Reissue filing fee			
114 160 214 80 Provisional filing fee			
SUBTOTAL (1) (\$)		0	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims		Extra Claims	
Independent		Fee from below	
Claims		Fee Paid	
Multiple Dependent			
30 - 28 = 2 x 18 = 36			
6 - 6 = 0 x 0 = 0			
Large Entity/Small Entity			
Fee Fee Fee Fee			
Code (\$)			
103 18 203 9 Claims in excess of 20			
102 84 202 42 Independent claims in excess of 3			
104 280 204 140 Multiple dependent claim, if not paid			
109 84 209 42 Reissue independent claims over original patent			
110 18 210 9 Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$)		36.00	
**or number previously paid, if greater; For Reissues, see above			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	
		180.00	

SUBMITTED BY		Complete (if applicable)	
Name (Print Type)	Frederick M. Fliegel, Ph.D.	Registration No. (Attorney/Agent)	36,138
Signature		Telephone	509-624-4276
		Date	Sept. 13, 2002

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